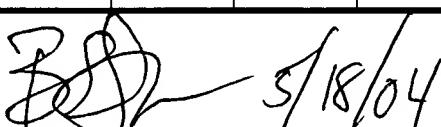
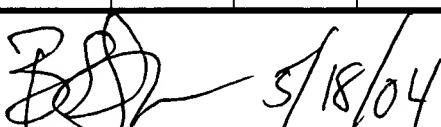


Issue Classification 	Application No.		Applicant(s)	
	09/457,228		MICHELSON, GARY K.	
	Examiner		Art Unit	
	Bruce E Snow		3738	

ORIGINAL		CROSS REFERENCE(S)						
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
623	17.11							
INTERNATIONAL CLASSIFICATION								
A6	1 F	2	44	/	/	/	/	
(Assistant Examiner) (Date)		 5/18/04						
(Legal Instruments Examiner) (Date)		 5/21/04						
		(Primary Examiner) (Date)						
Total Claims Allowed: 201								
				O.G. Print Claim(s)	O.G. Print Fig.			
				1	1419A			

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
1		31	5	61	34	91	64
2		32	6	62	35	92	65
3		33	7	63	36	93	66
4		34	8	64	37	94	67
5		35	9	65	38	95	68
6		36	10	66	39	96	69
7		37	11	67	40	97	70
8		38	12	68	41	98	71
9		39	13	69	42	99	72
10		40	14	70	43	100	73
11		41	15	71	44	101	74
12		42	16	72	45	102	75
13		43	16	73	46	103	76
14		44	17	74	47	104	77
15		45	18	75	48	105	78
16		46	19	76	49	106	79
17		47	20	77	50	107	80
18		48	21	78	51	108	81
19		49	22	79	52	109	82
20		50	23	80	53	110	83
21		51	24	81	54	111	84
22		52	25	82	55	112	85
23		53	26	83	56	113	86
24		54	27	84	57	114	87
25		55	28	85	58	115	88
26		56	29	86	59	116	89
27		1	57	87	60	117	90
28		2	58	88	61	118	91
29		3	59	89	62	119	92
30		4	60	90	63	120	93

Issue Classification 	Application No.	Applicant(s)
	09/457,228	MICHELSON, GARY K.
	Examiner	Art Unit
	Bruce E Snow	3738

ORIGINAL			CROSS REFERENCE(S)						
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)						
INTERNATIONAL CLASSIFICATION			/	/	/	/	/	/	
/	/	/	/	/	/	/	/		
/	/	/	/	/	/	/	/		
(Assistant Examiner) (Date)			Total Claims Allowed:						
(Legal Instruments Examiner) (Date)			(Primary Examiner)			(Date)		O.G. Print Claim(s)	O.G. Print Fig.

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
154	211	183	241			331	361
155	212	184	242			332	362
156	213	185	243			333	363
157	214	186	244			334	364
158	215	187	245			335	365
159	216	188	246			336	366
160	217	189	247			337	367
160	218	190	248			338	368
161	219	191	249			339	369
162	220	192	250			340	370
163	221	193	251			341	371
164	222	194	252			342	372
165	223	195	253			343	373
166	224	196	254			344	374
167	225	197	255			345	375
168	226	198	256			346	376
169	227	199	257			347	377
170	228	200	258			348	378
171	229	201	259			349	379
172	230					350	380
173	231					351	381
174	232					352	382
175	233					353	383
176	234					354	384
177	235					355	385
178	236					356	386
179	237					357	387
180	238					358	388
181	239					359	389
182	240					360	390